

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	det	68994	10/17/00
O.I.P.E. CLASSIFIER	ans	75	10/21
FORMALITY REVIEW	ML	523	11-5-CX
RESPONSE FORMALITY REVIEW	HJA	852	04-04-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	10/22
2			
3			
4			
5	✓	✓	10/23
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7			
8			
9	✓	✓	10/24
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13	✓	✓	10/25
14	✓	✓	10/26
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24	✓	✓	10/27
25	✓	✓	10/28
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Claim	Final	Original	Date
51	✓	✓	10/28
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57	✓	✓	10/29
58	✓	✓	10/30
59	✓	✓	10/31
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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